FEC FORM

STATEMENT OF ORGANIZATION

RECEIVED

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| FORM 1 | | ORGANIZ | ZAII | N | | ECOMANIONENTER |
|---------------------------------------|------------|--|------|---|----------------|---|
| NAME OF COMMITTEE (in | full) | (Check if name is changed) | | mple:If typing, type the lines. | 12FE4M | |
| WYOMING | ÇONGF | RESSIONAL C | AMPA | IGNS VICTO | RY FUN | ID FEDERAL PAC |
| ADDRESS (number a | nd street) | P. O. BOX 1 | 172 | | | |
| (Check if an is changed) | | BOCA RATO |)Ņ | | FL | 33429 |
| | | | CITY | | STATE | ZIP CODE |
| COMMITTEE'S E-MA (Check if is change | address | CONGRESSI | | • | FUNDP. | ACS@GMAIL,COM |
| COMMITTEE'S WEB | PAGE ADDI | RESS (URL) | | | | |
| (Check if address is changed) | | | | | | |
| 2. DATE ÖŞ |)" ′ 2̂4° | [′] 2012 [′] | | | | |
| 3. FEC IDENTIFIC | CATION NUI | MBER C | | | | |
| 4. IS THIS STATE | MENT 🔀 | NEW (N) OR | | AMENDED (A) | | |
| I certify that I have of | | JAMES LIN | | _ | is true, corre | ct and complete. |
| Signature of Treasure | er | James | Lin | Lu | Date Ö | 9°′24°′20′12 ′ |
| NOTE: Submission of | | us, or incomplete information NY CHANGE IN INFORMA | - | | | to the penalties of 2 U.S.C. §437g. S. |
| Office Use Only | | | | For further information of Federal Election Commission Toll Free 800-424-9530 | | FEC FORM 1 (Revised 02/2009) |